PTO/SB/17 (12-04v2)
Approved for use through 07/31/2006. OMB 0651-0032
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Feedble suant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL for FY 2005 Applicant claims small entity status. See 37 CFR 1.27		Complete if Known			
		Application Number	09/455,805		
		Filing Date	December 7, 1999		
		First Named Inventor	Susan D. Woolf et al.		
		Examiner Name	Nguyen, Maikhanh		
TOTAL AMOUNT OF PAYMENT	(\$) 1240.00	Art Unit	2176		
		Attorney Docket No.	003797.78802		

				Attorney Docket No.	003797.78	3802		_/
METHOD OF PAYMEN	T (check a	II that apply)						
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :								
□ Deposit Account Deposit Account Number: 19-0733 Deposit Account Name: Banner & Witcoff, LTD.								
For the above-ide	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments								
Under 37	CFR 1 16 a	nd 1 17		• •	• . •			
WARNING: Information on th authorization on PTO-2038.	is form may	become public. C	redit card infori	mation should not be ir	ncluded on this	form. Provide cr	edit card information and	
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FEE CALCULATION							<u> </u>	
1. BASIC FILING, SEARCH, AND EXAM FILING FEES					ATION FEES			
	FILING	Small Entity	JEAN	Small Entity		Small Entity		
Application Type	Fee (\$)	Fee(\$)	<u>Fee(\$</u>		Fee(\$)	Fee(\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FE	ES						Small Entity	
Fee Description Fee (\$)							<u>Fee (\$)</u>	
Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200					50 200	25 100		
Multiple dependent clain		cluding Reissues)			360	180	
Total Claims				Dependent Claims				
20 or HP	'=	_ x	=			<u>Fee (\$</u>	Fee Paid (\$)	
HP = highest number of	total claims p	aid for, if greater th	an 20.					
<u>Indep. Claims</u>	Extra C	laims <u>Fe</u>	<u>e(\$)</u>	<u>Fee Paid (\$)</u>				
3 or HP=		_ x	=					
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
100 = / 50 = (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): Request Continued Examination (\$790), 2-month EOT (\$450)								

SUBMITTED BY	\sim			
Signature	Laur O. Felloull	Registration No. (Attorney/Agent) 35,509	Telephone	202-824-3000
Name (Print/Type)	Gary D. Fedorochko		Date	March 30, 2006